SUBMIT: COMPLETED APPLICATION STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.

PO Box 58 Washburn, WI 54891 (715) 373-6138

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

BAYFIELD COUNTY, WISCONSIN APPLICATION FOR PERMIT

Date Stamp Received) C

Bayfield Co. Zoning Dept

JUN 19 2013

Permit #: Refund: Date: Amount Paid: \$575°S からなりの 737 7-813 いたり ENTERED

Suzette Address of Property: WILLOW Contractor Owner's Nam TYPE OF PERMIT REQUESTED—▶ Authorized Agent: (Person Signing Application on behalf of Owner(s)) PROJECT LOCATION で 14. Section S948 0 0 スるおろう Dickson SW 1/4 Legal Description: (Use Tax Statement) 2 rickson ☐ Is Property/Land within 300 feet of River, Stream (incl. Intermitten Creek or Landward side of Floodplain? If yes—continue— , Township hacking too Ö を表である X LAND USE 2 Gov't Lot 5 N, Range Aug ☐ SANITARY ☐ P
Mailing Addres 04 Lot(s) 7,5 682 501 9 Agent Phone: 115209-3977 104-008-2-45-4-20-3 Contractor Phone: ٤ City/state/zip: CSM PRIVY Vol & Page fown of: Bryliew Agen. S. Ash and ☐ CONDITIONAL USE HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp) Agent Mailing Address (Include City Agent Mailing Address (Include City Agent May) Plumber: Distance Structure is from Shoreline: Lot(s) No. 01-000-10000 Burralo City/State/Zip: 2482 Block(s) No. 3 SPECIAL USE City/State/Zip): Volume_ Lot Size Subdivision: Recorded Document 1887 55312 Ŕ Is Property in Floodplain Zone?
☐ Yes в.O nent: (i.e. Property Owr Artau.
X yes
Yes
Yes
Yes
Yes 012-270-6 Plumber Phone: Cell Phone: Telephone **Nritten Authorization** S C OTHER Are Wetlands ş LADS. 1600

Existing Structure: (If permit being applied for is relevant to it) Proposed Construction: of Completion
* include S Value at Time donated time & 2 不 New Construction (What are you applying for) Property Run a Business on Conversion Refocate (exi Addition/Alteration Project No Basement and/or basement 1-Story 2-Story Basement 1-Story + Loft # of Stories Foundation Length: Length Xseasonal Year Round Use bedrooms None 9 # Width: Width: Municipal/City (New) Sanitary None Compost Toilet Portable (w/service contract) Sewer/Sanitary System Is on the property? What Type of Specify Type Height: Height: X Well Water City

Non-Shoreland

☐ Shoreland

☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes---continue

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Distance Structure is from Shoreline :

□ Zo

Present? □ No

	× -	_	Other: (explain)		
	×		Conditional Use: (explain)		
	x }	(Special Use: (explain)		
	×	•	Accessory Building Addition/Alteration (specify)		
The state of the s	×		Accessory Building (specify)		□ Municipal Use
	X)		Addition/Alteration (specify)		
	×	(Mobile Home (manufactured date)		
	×		Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities)	[_]	
ware en construction in the first filled to the filled to	×	~	with Attached Garage		☐ Commercial Use
to the same of the			with (2 nd) Deck		-
			with a Deck		
	×	(,	with (2 nd) Porch		
456	× 28)	×	with a Porch		Residential Use
	×		with Loft	3	
1972	× 480 -	(36)	Residence (i.e. cabin, hunting shack, etc.)	\mathbb{R}	
	×	(Principal Structure (first structure on property)		A CAPTER CONTRACTOR OF THE CAPTER CONTRACTOR O
Square Footage	Dimensions	Dime	Proposed Structure	\	Proposed Use

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

[(we)] declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

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(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent:

Address to send

(If you are signing on behalf of the owner owne The Sac

Jetter Letter 9 Agua must ac company this ೧೧೪

HERC

Date

Copy of Tax Statement property send your Recor Recorded Deed

	Hold For Affidavit. Hold For Fees.	Hold For The Party of the	A A	Signature of Misperior
Date of Approval:				
v ,	SI.	TYES NO-	Condition(s):Town, Committee or Board Conditions Attached? The Steven	Durant Co
Date of Re-Inspection:	Library White John Date of Re	pected by:	113	Date of Inspection: γ
(B -1		The toppear	esposition structures	Inspection Record: PLOPSED
□ No	owner XX Veyed □Y		lly Created 3 Delineated	Was Parcel Legally Created Was Proposed Building Site Delineated
A	Previously Granted by Variance (B.O.A.) Previously Granted by Variance (B.O.A.) Case #:		c	Granted by Variance (B.O.A.) Ves XNo
ached □ Yes X/No	Mitigation Required □ Yes XNo Affidavit Required Mitigation Attached □ Yes XNo Affidavit Attached	Lot(s))	indard Lot	Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming
		Permit Date: 7.31.	8	Permit #: 13-0000
an: 7:31-13	13-72S # of bedrooms: Sanitary Date: C	Sanitary Number: 12	Issuance Information (County Use Only) Permit Denied (Date):	Issuance Informates Permit Denied (Date):
<u>· (P)</u> , and <u>Well</u> (W). Code.	NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.	nts) of New Construction its Expire One (1) Year from Two Family Dwelling: ALL own, Village, City, State or	IKE OF Mark Proposed Location NOTICE: All Land Use Pern The Construction Of New One 8 The local 1	(9) 3 (6)
six must be measured must be visible from sposed site of the structure, or must be	one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site marked by a licensed surveyor at the owner's expense.	r verifiable by the Department by u	r to the other previously surveyed corner, cat the owner's expense.	e previously surveyed corn rked by a licensed surveyo
le from one previously surveyed corner to the	e boundary line from which the setback must be measured must be visible from on	If the minimum required setback, the owner's expense. Net but less than thirty (30) feet from	r for to the placement of construction of a structure within ten (10) feet of the minimum required other previously surveyed corner or marked by a licensed surveyor at the owner's expense. Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (3)	other previously surveyed cor Prior to the placement or con
		I	table, Composting)	Setback to Drain Field Setback to Privy (Porta
ခဲ့ဝ Feet	Setback to Well	30 Feet	ik or Holding Tank	
Feet	Setback from 20% Slope Area Elevation of Floodplain	મુજ Feet ત્રુપા, Feet	t Lot Line	Setback from the West Lot Line
Feet	Setback from Wetland	192 Feet	rth Lot Line	Setback from the South Lot Line
- Feet	Setback from the Lake (ordinary high-water mark) Setback from the River, Stream, Creek Setback from the Bank or Bluff	340 Feet Jao Feet	Setback from the Centerline of Platted Road Setback from the Established Right-of-Way	etback from the Est
Measurement	1 186930	e	Description	
in in dies han dies Albeits auch Weiter von Albeits Weiter (Albeits Meine (Albe		sest point)	Setbacks: (measured to the closest point)	(8) Se
e Planning & Zoning Dept.	Changes in plans must be approved by the Planning & Zoning Dept.	ling)	Please complete (1) – (7) above (prior to continuing)	Please complete
	7	√		
Emmit A	CARY = PECONSTR			
= 54-13	*** *********************************	e; (*) River; (*) Stream/C tlands; or (*) Slopes over	any (*): any (*):	
	 	ting Structures on your F II (W); (*) Septic Tank (ST		(4) SI (5) SI
other letrope	1 50 C	North (N) on Plot Plan (*) Driveway and (*) Frontage F	Show Location of (*): (*) Driving Show Location of (*): (*): (*): (*): (*): (*): (*): (*):	(2) S (3) S
	1 u228 1	Arceal diess of winderyou		

